APPALACHIAN STATE UNIVERSITY CONFLICTS OF INTEREST REPORTING FORM Academic Year: 2012-13

Date:	
Name:	Title and Rank:
Department:	College:

Confidentiality Statement: The information you provide is confidential and will be used only as necessary to report, identify, and manage conflicts of interest as required by applicable law, regulations, and policies. If you have questions about this form, contact Office of General Counsel or consult the University Policy Manual.

Definition: *Immediate Family* is defined as spouse, and dependent children.

SECTION 1: CONFLICTS OF INTEREST

□ as an addendum to my most recent report with no changes □ as an addendum to my most recent report with new information

1. Financial Compensation; Management Responsibilities in a Related Business

a. Do you receive compensation or expense reimbursement for: service to professional associations; service on review panels; presentation of scholarly works; and/or participation in accreditation reviews?

No Yes, explain and include source of income and the total amount you and your immediate family have received over the past 12 months:

b. Do you receive income from any individual or entity that 1) does business with the University, or 2) might affect your institutional responsibilities?

No Yes, explain and include source of income and the total amount you and your immediate family have received over the past 12 months:

c. Do you or a member of your immediate family hold an executive position in an entity (i.e., a company or other form of corporation) that sponsors University research or programs?

🗌 No

 \square Yes, explain:

2. Equity Interests

Do you or your immediate family have an equity or ownership interest in an entity (i.e., a company or other form of corporation)?

No Yes, explain interest and indicate whether and how this interest is related to your University employment or external funding:

3. Royalties from textbooks or instructional materials

During the next twelve months, will you require students to purchase books or instructional materials for which you or an immediate family member receive compensation?

No Yes, explain and indicate whether and why these published materials are the best available for the educational purpose:

4. Intellectual Property

Do you receive royalties from the licensing of patented inventions subject to the Appalachian Intellectual Property Transfer Policy?

5. Service on Board of Directors or Scientific Advisory Board	
Do you or a member of your immediate family serve on the Board of Directors or Scientific Advisory Board of an enterprise that provides financial support for University research?	
No Yes, explain and indicate whether you or your immediate family receive any of this support and whether you assign students, post-doctoral fellows or other trainees to University projects sponsored by that enterprise:	
6. Research	
Do you accept funding for University research under conditions that require research results to be held confidential, unpublished or delayed in publication?	
No Yes, explain and provide associated AGrants file number(s):	
7. General / Other	
Is there any other conflict or potential conflict of interest relating to your institutional responsibilities that you	
should disclose? Conflicts may include financial or uncompensated activities.	
8. Public Health Service Investigator	
Are you a Public Health Service (PHS) investigator or likely to participate in a PHS proposal in the next 12 months?	
SECTION 2: CONFLICTS OF COMMITMENT	
1. During the period of your regular contract with ASU for 2011-12 (e.g., 9-month, 12-month), do you intend to engage in external professional activity for pay:	
a. that will pay \$5,000 or more? Yes No	
b. that will require 4 hours or more per week of your time required to fulfill your faculty responsibilities?	

- 2. If you intend to engage in ANY external professional activity for pay regardless of amount of compensation and time commitment, complete the information below:
 - a. Nature of activity:
 - b. Amount of time devoted to the activity (include a statement of definite hours necessary for the activity, if it is to be conducted within normal working hours):

SECTION 3: CERTIFICATION

I have read and understand Appalachian State University's Conflict of Interest and Commitment Policy and Guidelines for Faculty/EPA Administrative Personnel (available at policy.appstate.edu) and have completed this report to the best of my knowledge. I will cooperate with a review of this information and if required, I will comply with any conditions or restrictions imposed by Appalachian State University to manage any real or perceived conflicts or eliminate the identified conflict.

No

Yes, explain: